

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		02/23/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	3600
FORMALITY REVIEW		71476	4/24/00
RESPONSE FORMALITY REVIEW		71476	6/28/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	2/23/00
2	✓	✓	2/23/00
3	✓	✓	2/23/00
4	✓	✓	2/23/00
5	✓	✓	2/23/00
6	✓	✓	2/23/00
7	0	0	
8	0	0	
9	0	0	
10	0	0	
11	0	0	
12	0	0	
13	0	0	
14	0	0	
15	0	0	
16	0	0	
17	0	0	
18	0	0	
19	0	0	
20	0	0	
21	0	0	
22	0	0	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	
27	✓	✓	
28	✓	✓	
29	0	0	
30	0	0	
31	0	0	
32	0	0	
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36	0	0	
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38	0	0	
39	0	0	
40	0	0	
41	0	0	
42	0	0	
43	0	0	
44	0	0	
45	✓	✓	
46	✓	✓	
47	✓	✓	
48	0	0	
49	0	0	
50	0	0	

Claim	Final	Original	Date
51	0	0	
52	0	0	
53	0	0	
54	0	0	
55	0	0	
56	0	0	
57	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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